

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL						
OMB Number Expires: Mar Estimated ave hours per form	rch 30, 2008 erage burden					
SEC U	ISE ONLY					
Prefix	Serial					

DATE RECEIVED

Name of Offering (Estimote in this is at	amendment and name has en	angeu, a	and marcate change.)			
Offering of Series C Preferred Stoc "Common Stock Warrant"), the und issuable upon exercise of the Common	lerlying shares of Series C	issuable	upon exercise of the	e Series C Warrants	, the underlying sha	res of Common Stock
Filing Under (Check box(es) that apply)	): ☐ Rule 504		Rule 505	Rule 506	Section 4(6)	☐ ULOE
Type of Filing:			New Filing	×	Amendment	
	A. B.	ASIC ID	DENTIFICATION DA	ATA		
1. Enter the information requested ab	out the issuer					
Name of Issuer ( check if this is an ar	nendment and name has chan	ged, and	indicate change.)		*0602	5 1 3 8 ×
Beceem Communications Inc.					`\	
Address of Executive Offices	(Number and	Street,	City, State, Zip Code)	Telephone Number	(Including Area Code	;)
3930 Freedom Circle, Suite 101, Santa	Clara, CA 95054			(408) 496-1010		
Address of Principal Business Operation (if different from Executive Offices)	s (Number and Street, City, S	tate, Zip	Code)	Telephone Number (408) 496-1010	(Including Area Code	CESSED
Brief Description of Business	<del></del>			<del></del>	n.a.	AR 1 0 2006
Developing wireless broadband techno	ology.				[4] [	All 1 a room
Type of Business Organization				<del></del>	T	HOWE
<b>区</b> corporation	☐ limited partnership, alr	eady for	med	1	other (please spect)	MAN: 1-
☐ business trust	☐ limited partnership, to	oe forme	ed			·
Actual or Estimated Date of Incorporation	•	1			☑ Actual [	☐ Estimated
Jurisdiction of Incorporation or Organiza	,		Service abbreviation in foreign jurisdiction)	or state. DE		

### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exerption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

# A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

*		<u>.</u>								
Check Box(es) that Apply:	☐ Promoter	➤ Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner					
	t name first, if individual)									
		Street, City, State, Zip Code)								
c/o Beceem Communications, Inc., 3930 Freedom Circle, Suite 101, Santa Clara, CA 95054										
Check Box(es) that Apply:	☐ Promoter	➤ Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner					
Full Name (Las Mandava, Sur	t name first, if individual) endra Babu									
		Street, City, State, Zip Code)								
<del></del>		eedom Circle, Suite 101, Sant	<del></del>	<u>_</u>						
Check Boxes that Apply:	☐ Promoter	Beneficial Owner     ■	☐ Executive Officer	☑ Director	General and/or Managing Partner					
	name first, if individual)									
Paulraj, Arogy		Street, City, State, Zip Code)								
		eedom Circle, Suite 101, Santa	Clara, CA 95054							
Check Boxes that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner					
Full Name (Last Tan, Lip-Bu	name first, if individual)									
	idence Address (Number and ernational, One California S	Street, City, State, Zip Code) treet, 28 <sup>th</sup> Floor, San Francisc	eo, CA 94111							
Check Boxes that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	E Director	General and/or Managing Partner					
Elahian, Kamr										
	dence Address (Number and S lyst Partners, 255 Shoreline	Street, City, State, Zip Code) Drive, Suite 520, Redwood Sl	nores, CA 94065							
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	<b>☒</b> Director	General and/or Managing Partner					
Full Name (Last Stevens, Mark	name first, if individual)									
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Sequoia Capital, 3000 Sand Hill Road, Building 4, Suite 180, Menlo Park, CA 94025										
Check Boxes that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner					
•	name first, if individual) Partners II, L.P.									
Business or Residence Address (Number and Street, City, State, Zip Code) 255 Shoreline Drive, Suite 520, Redwood Shores, CA 94065										
Check Box(es) that Apply:	☐ Promoter	E Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner					
Full Name (Last name first, if individual)  Entities affiliated with Pacven Walden Ventures V, L.P.										
	dence Address (Number and		<del></del>	<del></del>						
One California Street, 28 <sup>th</sup> Floor, San Francisco, CA 94111										

# A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

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Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner					
Full Name (Las	name first, if individual) ed with Sequoia Capital XI									
Business or Residence Address (Number and Street, City, State, Zip Code) 3000 Sand Hill Road, Building 4, Suite 180, Menlo Park, CA 94025										
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner					
	name first, if individual)	.L.P., 1760 The Alameda, #30	0. San Jose, CA 95128							
	idence Address (Number and		, , , , , , , , , , , , , , , , , , ,		· · · · · · · · · · · · · · · · · · ·					
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner					
Full Name (Last Dotz, Mary	name first, if individual)									
	dence Address (Number and nmunications, Inc., 3930 Fro	Street, City, State, Zip Code) eedom Circle, Suite 101, Santa	a Clara, CA 95054							
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner					
Full Name (Last	name first, if individual)	en e		· · · · · · · · · · · · · · · · · · ·	and the second s					
Business or Resi	dence Address (Number and	Street, City, State, Zip Code)		·	of .					
Check Boxes that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner					
Full Name (Last	name first, if individual)									
Business or Resi	dence Address (Number and	Street, City, State, Zip Code)								
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner					
Full Name (Last	name first, if individual)									
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Boxes that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner					
Full Name (Last name first, if individual)										
Business or Resid	dence Address (Number and S	Street, City, State, Zip Code)								
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner					
Full Name (Last name first, if individual)										
Business or Resid	dence Address (Number and S	Street, City, State, Zip Code)			:					

					B. INFOR	VIATION A	BOUL OFF	EKING	<u> </u>		•	
П. Н	as the issuer sold,	or does the is	ssuer intendt					g? 1g under ULC			Yes 1	No <u>X</u>
2. What is the minimum investment that will be accepted from any individual?									\$	N/A		
3. Do	Does the offering permit joint ownership of a single unit?									Yes 1	No <u>X</u>	
so reį	nter the informati- licitation of purch gistered with the S oker or dealer, you	nasers in con SEC and/or w	nection with	sales of se states, list	curities in the name of	the offering. the broker o	If a person r dealer. If n	n to be listed	is an associa	ted person of	r agent of a	broker or dealer
Full Na	me (Last name fir	st, if individu	ıal)		<u></u>		·				·	
Busines	s or Residence Ac	idress (Numb	per and Stree	t, City, State	e, Zip Code)		<del>-</del>				<del></del> .	<del>.</del>
Name o	f Associated Brok	er or Dealer		······································								,
	n Which Person L								<del> </del>			<del></del>
•	"All States" or ch		•									All States
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Name of	f Associated Broke	er or Dealer										
States in	Which Person Li	sted Has Soli	cited or Inte	nds to Solic	it Purchaser	s		,	•			
(Check '	"All States" or che	ck individua	l States)	•••••		••••••			***************************************			All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
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run Nan	ne (Last name ms	t, ii iiidividua	11)									
Business	or Residence Ado	dress (Numbe	er and Street,	City, State	, Zip Code)							
Name of	Associated Broke	er or Dealer									· · · · · · · · · · · · · · · · · · ·	
States in	Which Person Lis	sted Has Solid	cited or Inter	ds to Solici	t Purchasers	}						
	All States" or che				*							All States
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(IL)	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
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#### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." transaction is an exchange offering, check this box 🗆 and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security Aggregate Amount Already Offering Price Sold Debt ..... Equity ..... 30,000,000.00 28,950,000.00 Preferred ☐ Common Convertible Securities (including warrants)..... 1,535,000.00 Partnership Interests.... Other (Specify \_\_\_\_\_) Total..... \$ 31,535,000.00 28,950,000.00 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Number Aggregate Investors Dollar Amount Of Purchases Accredited Investors... 28,950,000,00 Non-accredited Investors 0 Total (for filings under Rule 504 only)..... Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listedin Part C - Question 1. Type of **Dollar Amount** Security Sold Type of Offering Rule 505 ..... Regulation A..... Rule 504 ..... Total..... Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees.... Printing and Engraving Costs..... × Legal Fees..... 100,000.00

100,000.00

Accounting Fees

Engineering Fees.....

Sales Commissions (specify finders' fees separately).....

Other Expenses (Identify)

Total .....

C. OFFERING PRICE, NUMBER OF	INVESTORS, EXPENSES ANI	USE OF PROCEEDS	
<ul> <li>Enter the difference between the aggregate offering price given in a in response to Part C – Question 4.a. This difference is the "adjusted</li> </ul>			\$31,435,000.00
5. Indicate below the amount of the adjusted gross proceeds to the issuer of the amount for any purpose is not known, furnish an estimate and payments listed must equal the adjusted gross proceeds to the issuer set	check the box to the left of the	estimate. The total of the	
		Payment to Officers, Directors, & Affiliates	Payment To Others
Salaries and fees		□ \$ <b>o</b>	□ s <u>o</u>
Purchase of real estate		□ s <u>o</u>	
Purchase, rental or leasing and installation of machinery and equipment		□ so	□ so
Construction or leasing of plant buildings and facilities		□ s <u>o</u>	□ s <u> </u>
Acquisition of other businesses (including the value of securities involved in exchange for the assets or securities of another issuer pursuant to a merger	)	□ s <u> </u>	□ so
Repayment of indebtedness.		□ s <u>o</u>	□ \$ <u>0</u>
Working capital		□ \$ <u>0</u>	<b>≥</b> \$ 31,435,000.00
Other (specify):		□ \$o	□ s 0
		□ \$ 0	
Column Totals			
Total Payments Listed (column totals added)			1,435,000.00
		<u></u>	<u> </u>
			•
D. FED	ERAL SIGNATURE		
The issuer had duly caused this notice to be signed by the undersigned duly an undertaking by the issuer to furnish to the U.S. Securities and Exchange C non-accredited investor pursuant to paragraph (b)(2) of Rule 502.			
Issuer (Print or Type)	Signature		Date
Beceem Communications Inc.		#	2/9/06
Name of Signer (Print or Type)	Title of Signer (Print or Type)	4	
Eric C. Jensen	Secretary	$\sim$	

# ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)